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VALUE IN HEALTH

Contributed Poster Presentations

Poster Session I

ALLERGY

PAL1

DETERMINING THE MINIMAL CLINICALLY IMPORTANT DIFFERENCE FOR THE ESPRINT-15 QUESTIONNAIRE FOR PATIENTS WITH ALLERGIC RINHITIS

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OBJECTIVE: To determine the minimal clinically important difference (MCID) for improving interpretation of the recently validated Esprint-15 questionnaire, to measure health-related quality of life for patients with allergic rhinitis. **METHODS:** An observational multicenter study was carried out with allergic rhinitis patients to validate the Esprint questionnaire (15 items of symptoms, daily life activity, sleep and psychological impact). It uses 7-point response options. Global score range from zero (worse) to 5.8 (better). MCID was determined by applying the method previously used by Juniper et al. (1996) in the case of the Rhinoconjuntivitis Quality of Life questionnaire. Patients completed twice the Esprint-15 and assessed their change on health status in a 13-point scale from –6 (a very great deal worse) to 0 (no change) to +6 (a very great deal better). Patients were classified as "no change" (–1, 0 or +1), "MCID" (+3 or +2), "moderate change" (+4 or +5) and "large change" (+6). **RESULTS:** Valid responses for the 2 visits were obtained from 245 patients (mean age 32, 62.2% women, average of moderate symptoms at inclusion, mean 7 years from diagnosis, 58% were following AR treatment) of which: 30 (12.2%) reported "large change", 86 (35.1%) reported "moderate change", 55 (22.4%) reported "MCID", 48 (19.6%) reported "no change" and 25 (10.2%) reported deterioration in health status. Mean (SD) increases in the Esprint-15 global score were: 0.2 (0.9) for patients with "no change", 1.1 (0.9) for patients at the "MID", 2 (1.1) for patients reporting "moderate change", and 2.9 (1.2) for patients reporting "large change". Because of the small sample size, results for patients reporting negative changes are not presented, although they suggest an attenuate but similar tendency. **CONCLUSION:** There is evidence that mean positive changes in global score from Esprint-15 questionnaire of about 1 or more may be considered of clinical importance.

PAL2

ATTRIBUTES FOR PREFERENCE OF NEW FAST DISSOLVING TABLET (FDT) FORMULATION OF EBASTINE IN PATIENTS WITH ALLERGY

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OBJECTIVE: The main objective of the research is to understand the perceived key attributes and strengths of the FDT formulation of Ebastine. **METHODS:** The new formulation Ebastine FDT was tested using placebo both in patients (60) and physicians (82) throughout qualitative face-to-face interviews in Belgium, France, Finland, Germany and Italy. Patients suffering from chronic or acute/seasonal allergies regularly taking prescription antihistamines and physicians who are high prescribers of antihistamines were included. **RESULTS:** The key attributes for preference of the new FDT formulation are convenience and ease of use (can be taken everywhere, not water is needed) and the perception of faster onset of action. After tasting there's a positive evaluation for the majority (57 patients out of 60 and 75 physicians out of 82) on most FDT formulation attributes (correct texture, appearance, colour and size and very rapid dissolving). Taste evaluation was controversial (mint flavour) and patients difficulties handling the blister disappeared when instructed. The FDT formulation is perceived as suitable for any type of patients, particularly those with acute episodes, active lifestyle, difficulties to swallow and gastrointestinal problems according to patients; and those with an active lifestyle according to physicians. Most patients consider that the new formulation can improve compliance (45 out of 60). The likelihood of taking/prescribing Ebastine FDT is quite high, rating 7.9 (4.2) and 7.6 (5.7) respectively for patients and physicians on a 1–10 scale (1–7 scale in Finland). Most patients (47 out of 60) and physicians (54 out of 82) preferred the new FDT formulation. **CONCLUSIONS:** The new FDT formulation is preferred by both physicians and patients, because it's easier to comply, more convenient and it's associated with a perception of faster onset of action.

PAL3

DEVELOPMENT, PILOT TESTING, SCORING AND VALIDATION OF A MANAGEMENT TOOL FOR PATIENTS UNDERGOING SPECIFIC IMMUNO-THERAPY

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OBJECTIVE: Clinicians in charge of allergic rhinitis patients miss specific questionnaires assessing patients' expectations, satisfaction, adherence, persistence, attitudes toward Specific Immuno-therapy (SIT). Our aim was to provide them with a specific instrument allowing bettering adapting care to the patient's characteristics, perceptions and behaviour. **METHODS:** A conceptual model was identified from a literature review, 5 clinician and 21 patient interviews. A test version of the questionnaire was developed and independently validated by an Advisory Committee (AC). Five patients suffering from allergic rhinitis and treated by SIT completed the questionnaire and were asked to comment the questionnaire in-depth. It was redrafted and included in a pilot study (10 clinicians, 30 patients) in real conditions of use. A revised questionnaire was administrated by 211 clinicians to 571 patients (380 having a SIT and 191 about to)